UMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES *000 PRIMARY AND GENERAL ELECTIONS* State of Nevada Office District (if applicable) Two live Village NV. 89450 833-1766 Mailing Address (include city and zip code) REPORT NUMBER 3 - DUE JANUARY 15, 2001 Report Period Begins: October 26, 2000 Report Period Ends: January 5, 2001 **CONTRIBUTIONS SUMMARY** 1. From Report Numbers 1 and 2, total amount of contributions in excess of \$100 2. From Report Numbers 1 and 2, total amount of contributions of \$100 or less 3. Report Number 3, total amount of contributions in excess of \$100 4. Report Number 3, total amount of contributions of \$100 or less From Report Numbers 1, 2, and 3, actual number of contributions of \$100 or less 6. Interest and income earned, if any, during this report period 7. TOTAL AMOUNT OF ALL CONTRIBUTIONS (add lines 1 through 6) **EXPENSES SUMMARY** 8. From Report Numbers 1 and 2, total amount of expenses in excess of \$100 9. From Report Numbers 1 and 2, total amount of expenses of \$100 or less 10. Report Number 3, total amount of expenses in excess of \$100 11. Report Number 3, total amount of expenses of \$100 or less 12. TOTAL AMOUNT OF ALL EXPENSES (add lines 7 through 11) If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer. I declare under penalty of perjury that the foregoing is true and correct.

Prescribed by Secretary of State NRS 294A.120, 294A.200 EL201 003(rev 04/00)

Executed on

Total number of pages for this report

JOSEPH K	Lubo CONSTABLE	INCHNE VILLAGE
Candidate's Name (print)	Office	District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK / IF IN KIND
N/A				

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Joseph Kubo	Constable	Incline VILLAGE
Candidate's Name (print)	Office	District (if applicable)

Contributions of \$100 or less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION		DATE OFEACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
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Joseph Kubo Constable

Joseph Kubo Constable

Office Candidate's Name (print)

Incline VIIAGE
District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	-6
Expenses related to volunteers	В	-0
Expenses related to travel	С	0
Expenses related to advertising	D	-6-
Expenses related to paid staff	E	-0
Expenses related to consultants	F	0
Expenses related to polling	G	0
Expenses related to special events	Н	0
Goods and services provided in kind for which money would otherwise have been paid	I	0
Other miscellaneous expenses	J	-6

PAGE 4 OF 6

Joseph Kubo	Constable	Incline VillaGe
Candidate's Name (print)	Office	District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
W/A			
	,		

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PAGE 5 OF 6

Joseph	Kubo	CONSTABLE	Incline Village
Candidate's Name (print)		Office	District (if applicable)

Expenses of \$100 or Less

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